

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011586

FILED
Apr 14, 2009
Secretary of State

Entity Name: RAICES DE ESPERANZA INC.

Current Principal Place of Business:

11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

2655 COLLINS AVE.
APT. 404
MIAMI BEACH, FL 33140

Current Mailing Address:

PO BOX 260486
MIAMI, FL 33126

New Mailing Address:

FEI Number: 20-3801097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS RD., STE. 221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

GORORDO, LEONARDO F MR.
2655 COLLINS AVE.
APT. 404
MIAMI BEACH, FL 33140 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: L. FELICE GORORDO

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GORORDO, L. FELICE
Address: P.O. BOX 260486
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: CABRERA, DIANE
Address: P.O. BOX 260486
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: GRIMAL, NICOLE M.
Address: P.O. BOX 260486
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: JIMENEZ, JOSE
Address: P.O. BOX 260486
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: ALDIR, MARITZA B
Address: PO BOX 260486
City-St-Zip: MIAMI, FL 33140 US

Title: D () Delete
Name: CHRISTOPHER, GUEITS
Address: PO BOX 260486
City-St-Zip: MIAMI, FL 33126 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: L. FELICE GORORDO

MR.

04/14/2009

Electronic Signature of Signing Officer or Director

Date